

Commonwealth of Virginia
Virginia Department of Health
Alleghany/Roanoke City Health Districts



Date Rec'd:	_____
Receipt #:	_____
HD ID#:	_____
Tax Map#:	_____
Sewage System Code:	_____

Application for a Sewage Disposal ☐ Water Supply System ☐ Or Both ☐

(As Printed on Permit)

Applicant Name: _____ Primary Phone: _____

Applicant Address: _____

Agent (If Applicable): _____ Primary Phone: _____

Agent Address: _____

Directions to Property: _____

Map Tax #: _____ Subdivision: _____

Section: _____ Block: _____ Lot: _____ Acreage: _____ Dimensions: _____

Type of Application: Certification Letter (New Construction Only) ☐ Construction Permit ☐

Type of Construction Permit: New ☐ Repair ☐ Well Abandonment ☐ Redemption of Certification Letter ☐
Modification ☐ Expansion ☐ Replacement ☐ Upgrade ☐

Sewage System Information

Single Family Home ☐ Number of Bedrooms _____ Multi-Family Dwelling ☐ Total Number of Bedrooms _____

Non Residential: ☐ Describe: _____

Will there be a basement? Yes ☐ No ☐ If yes, will there be plumbing fixtures in basement? Yes ☐ No ☐

Are any conditions proposed on this Construction Permit? Yes ☐ No ☐ If yes, check or describe all proposed conditions that apply: Reduced water flow ☐ Limited occupancy ☐ Intermittent of Seasonal Use ☐ Temporary use not to exceed 1 year ☐

Other ☐ (Describe): _____

Do you wish to apply for a Betterment Loan? Yes ☐ No ☐ If Yes, there is a \$50 fee for a Betterment Loan determination.

Water Supply Information

Will water supply be: Public ☐ **Or** Private ☐ Will water supply be: Existing ☐ **Or** Proposed ☐

Is this a Replacement Well? Yes ☐ No ☐ If this is a Replacement Well, will the old well be abandoned? Yes ☐ No ☐

Will any proposed buildings within 50 feet of the proposed well site be termite treated? Yes ☐ No ☐

Is the proposed well site within 50 feet of a neighboring agricultural operation? Yes ☐ No ☐

All Applicants

Is this an *OSE/PE Application? Yes ☐ No ☐ If yes, the OSE/PE Package attached? Yes ☐ No ☐

In order for the Virginia Department of Health (VDH) to process your application you must attach a completed site sketch of the property and a survey plat if available. The site sketch should show the property lines, actual and/or proposed buildings and the desired location of the sewage disposal system and/or well. When the site evaluation is conducted the property lines, building location and the proposed well and sewage disposal system sites must be clearly marked and the property sufficiently visible to see the topography, otherwise the application will be denied.

I give permission to VDH to enter onto the property described during normal business hours for the purpose of processing this application and to perform quality assurance checks of evaluation and designs certified by an Onsite Soil Evaluator *(OSE) or a Professional Engineer *(PE) as necessary until the sewage disposal system has been constructed and approved.

Signature of Applicant/Agent: _____ Date: _____

Print Name Clearly: _____

October 5, 2011